Approving	g Official Batch Memo
Date:	Unit Batch Number*:
То:	(example: ID-BOD-001) Casual Payment Center 1249 South Vinnell Way, Suite 108 Boise, ID 83709 (Please overnight mail / Call Casual Payment Center for Saturday delivery)
From:	Name Phone Number
	Unit Address
	**If coming directly from an incident please provide an incident agency contact name and phone number.
	Check here if you would like a confirmation of processed batch sent to you.
	Email address or fax number for batch confirmation
Subject:	Payment of Casual Hire, Emergency Firefighter Time Reports
Attached a	are the forms necessary for processing casual hire payrolls as follows:
Number of	f OF-288s in Batch: f Casual Names submitted (attach list): s attach Crew Manifest)
I have veri	ified, attached, or have on file the following:
	288s have been audited and are attached, including signatures of the casual (if available) and an <i>inal</i> Time Officer signature on line 26 of the OF-288.
2. I-9s a	are completed and on file at the hiring unit (the CPC will return any I-9s to the hiring unit).
3. W-4s	s and State withholding forms are complete and attached, or previously submitted.
	fied Cost Accounting Data.
	r (explain):
If you have	e any questions, please contact at
	ing official, I certify the attached OF-288s are accurate, appropriate, and legal for payment and meetons of the Department of the Interior Pay Plan for Emergency Workers.
Print App	oroving Official Name:
	ING OFFICIAL SIGNATURE:

^{*}A unique batch number should be assigned to each payroll submitted. Please reference the applicable batch number when contacting the Casual Payment Center with questions.